

# **2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000106202

**FILED**  
**Jul 26, 2007**  
**Secretary of State**

**Entity Name:** BELL SHOALS PARTNERS, LLC

**Current Principal Place of Business:**

1438 BLOOMINGDALE AVE  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

1438 BLOOMINGDALE AVE  
VALRICO, FL 33594

**New Mailing Address:**

**FEI Number:** 20-4352636

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHRISTOHER, NORMAN H  
315 S HYDE PARK AVE  
TAMPA, FL 33606 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SHIELDS, CHASTAN  
Address: 1438 BLOOMINGDALE AVE  
City-St-Zip: VALRICO, FL 33594

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: NORTHWEST CONSULTING, GROUP, L.L.C.  
Address: 2401 US HWY 70 SW  
City-St-Zip: HICKORY, NC 28602

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHASTAN SHIELDS

MGRM

07/26/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date